### Case 17-09688 Doc 1 Filed 03/28/17 Entered 03/28/17 12:23:51 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Elizabeth		
	your government-issued picture identification (for example, your driver's license or passport).	First name		First name
		Middle name	_	Middle name
	Bring your picture identification to your	Vincze		
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of			
	your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2252		

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Case number (if known)

Debtor 1 Elizabeth Vincze

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		139 Hill St.  Mount Prospect, IL 60056  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Cook County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Document Case number (if known) Debtor 1 Elizabeth Vincze

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		☐ Ch	napter 13					
8.	How you will pay the fee		about how you	nay pay. Typically, if you are paying the fee orney is submitting your payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money ehalf, your attorney may pay with a credit card or check with			
					otion, sign and attach the Application for Individuals to Pay			
			_	n Installments (Official Form 103A).	ion only if you are filing for Chapter 7. By law, a judge may,			
			but is not requi applies to your	ed to, waive your fee, and may do so only if amily size and you are unable to pay the fee	your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out fficial Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
			District	When	Case number			
			District	When	Case number			
			District	When	Case number			
0.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
			Debtor		Relationship to you			
			District	When	Case number, if known			
			Debtor		Relationship to you			
			District	When	Case number, if known			
l1.	Do you rent your residence?	■ No	Go to lin	12.				
	residence:	☐ Ye	s. Has you	andlord obtained an eviction judgment agai	nst you and do you want to stay in your residence?			
				o. Go to line 12.				
				. Go to line 12.				

Debtor 1	Elizabeth Vincze	Document	Page 4 of 53 Case number (if known)	

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	te & ZIP Code			
	separate sheet and attach it to this petition.		Check	k the appropriate bo	ox to describe your business:			
	·				ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement	of				
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Cod	de.		
Par	Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any		· razar a c	ad Froporty of 7m.	,			
	property that poses or is	No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code			
					ramos, shoot, ony, state a zip sous			

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Debtor 1 Elizabeth Vincze

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 **Elizabeth Vincze** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** How much do you □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50.000.001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100.000.001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million \$50.001 - \$100.000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elizabeth Vincze Signature of Debtor 2 Elizabeth Vincze Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on March 28, 2017

MM / DD / YYYY

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Debtor 1 Elizabeth Vincze Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James	J. Burns Jr. #	Date	March 28, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
James J. E	Burns Jr. #		
Printed name			
The Burns	Law Firm P.C.		
Firm name			
53 West Ja	ackson Boulevard		
Suite 724			
Chicago, I	L 60604		
Number, Street,	City, State & ZIP Code		
Contact phone	312-880-0195	Email address	info@burnsbankruptcy.com
6200956			
Darnumbar 9 C	tota		

		1200.11111	HI PAUE O UL SS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elizabeth Vincze			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,800.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,800.00
Pai	t 2: Summarize Your Liabilities		
		Your lia	<b>bilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	95,676.52
	Your total liabilities	\$	95,676.52
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	800.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,105.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and su	Ibmit this form to

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$_	
		1	

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula E/E compthe followings	Total clain	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

			Document	Page 10 of 53		
Fill in	this info	ormation to identify your	case and this filing:			
Debtor	· 1	Elizabeth Vincze				
		First Name	Middle Name	Last Name		
Debtor						
(Spouse,	if filing)	First Name	Middle Name	Last Name		
United	States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
C						
Case r	number			_		☐ Check if this is an amended filing
						amended ming
Offic	ial F	orm 106A/B				
Sch	edi	ıle A/B: Prop	ertv			12/15
		<b>_</b>				
hink it f nforma	its best.	Be as complete and accuratore space is needed, attach	e items. List an asset only once. If te as possible. If two married peop a separate sheet to this form. On t	le are filing together, both ar	e equally responsible for s	upplying correct
Part 1:	Descri	be Each Residence, Building	g, Land, or Other Real Estate You O	wn or Have an Interest In		
Do		or have any local or conitable	e interest in any residence, building	a land or similar property?		
. Бо ус	ou own c	n nave any legal of equitable	e interest in any residence, building	j, ianu, or similar property?		
■ No	o. Go to F	Part 2.				
□ Ye	es. Wher	e is the property?				
Part 2:	Descri	be Your Vehicles				
someor	ne else o	drives. If you lease a vehic	uitable interest in any vehicles, le, also report it on Schedule G: litility vehicles, motorcycles			chicles you own that
Y	es					
3.1	Make:	Mercedes	Who has an interest in t	he property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	ML 500	Debtor 1 only			aims Secured by Property.
	Year:	2004	Debtor 2 only		Current value of the	Current value of the
			Debtor 1 and Debtor 2	,	entire property?	portion you own?
П		ormation:	At least one of the deb	tors and another		
	In need	d of repairs	Check if this is comm	nunity property	\$2,950.00	\$2,950.00
Exam  N  Y  Add  pag  Part 3:	nples: B	oats, trailers, motors, personals, trailers, motors, personals, trailers, motors, personals, person	TVs and other recreational vehonal watercraft, fishing vessels, so you own for all of your entries of the that number here	nowmobiles, motorcycle ac	r entries for	\$2,950.00  Current value of the portion you own? Do not deduct secured
L La.	cohold	goods and furnishings				claims or exemptions.
o. mou	senoid	goods and furnishings				

Examples: Major appliances, furniture, linens, china, kitchenware

■ No

Official Form 106A/B Schedule A/B: Property

D	ebtor 1	Case 17-09688 Elizabeth Vincze	Doc 1	Filed 03/28/17 Document	Entered 03/28/17 12:23:53 Page 11 of 53 Case number (if known	L Desc Main
	П Уес	Describe			<u> </u>	,
7						
7.	□No				oment; computers, printers, scanners; mus	ic collections; electronic devices
	100.					<b>4450.00</b>
_		Cellpho	one			\$150.00
8.	Example ■ No	bles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, c	oin, or baseball card collections;
9.	Example No	ent for sports and hobbie les: Sports, photographic, ex musical instruments		ther hobby equipment;	bicycles, pool tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
10	■ No	ms  bles: Pistols, rifles, shotguns  Describe	s, ammunition	, and related equipmen	t	
11	□ No	os ples: Everyday clothes, furs Describe	, leather coats	s, designer wear, shoes	accessories	
		Used w	omen's clo	thes, shoes, coats		\$1,500.00
	■ No □ Yes.	bles: Everyday jewelry, cost  Describe	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gem	s, gold, silver
13	Exam <sub>l</sub> ■ No	<pre>irm animals ples: Dogs, cats, birds, hors    Describe</pre>	es			
14	■ No	ther personal and househo	-	ս did not already list, iւ	ncluding any health aids you did not lis	t
15		the dollar value of all of yo art 3. Write that number h			ny entries for pages you have attached	\$1,650.00
		scribe Your Financial Assets				
D	o you ov	vn or have any legal or eq	uitable intere	est in any of the follow	ing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16	■ No	ples: Money you have in you	-		osit box, and on hand when you file your po	etition

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Case number (if known) Document Debtor 1 **Elizabeth Vincze** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$200.00 Checking U.S. bank U.S. Bank \$0.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No

No

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

☐ Yes. Give specific information about them...

☐ Yes. Give specific information about them...

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Debt	or 1	Elizabeth Vincze		Document	Case number (if known)	
	Examp No	es, franchises, and other ples: Building permits, exclusions Give specific information al	sive licenses		n holdings, liquor licenses, professional licens	ses
Mon	ey or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
_	No	unds owed to you  Give specific information ab	oout them, inc	luding whether you alre	ady filed the returns and the tax years	
	Examp No	support  les: Past due or lump sum a		usal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement
	Examp No	imounts someone owes y iles: Unpaid wages, disabilit benefits; unpaid loans Give specific information	ty insurance į		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	Examp No	Name the insurance compa			HSA); credit, homeowner's, or renter's insura Beneficiary:	nce Surrender or refund value:
! !	If you a someo No	erest in property that is dare the beneficiary of a living the has died.  Give specific information			ed surance policy, or are currently entitled to rec	
	Examp No	against third parties, whe les: Accidents, employmen			it or made a demand for payment s to sue	
	No	contingent and unliquidate  Describe each claim	ed claims of	every nature, includin	g counterclaims of the debtor and rights t	o set off claims
			Worke 2014	rs Compensation Cl	aim - date of Accident October	Unknown
	ny fin No	ancial assets you did not	already list			
		Give specific information				
		he dollar value of all of your transfer he de trans			ny entries for pages you have attached	\$200.00
Part !	5: Des	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	

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Case number (if known) Document Debtor 1 **Elizabeth Vincze** 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$2,950.00 57. Part 3: Total personal and household items, line 15 \$1,650.00 Part 4: Total financial assets, line 36 58. \$200.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$4,800.00 \$4,800.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,800.00

		I A A A HIII.					
Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Elizabeth Vincze						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number _							
(if known)							

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2004 Mercedes ML 500 121,000 miles In need of repairs	\$2,950.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Cellphone Line from Schedule A/B: 7.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale A.B. 111			100% of fair market value, up to any applicable statutory limit	
Used women's clothes, shoes, coats Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(a)
Ellie Helli Gonedale / V.Z. T.T.			100% of fair market value, up to any applicable statutory limit	
Checking: U.S. bank Line from Schedule A/B: 17.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Ellie Helli Gonedale 772.			100% of fair market value, up to any applicable statutory limit	
Workers Compensation Claim - date of Accident October 2014	Unknown		100%	820 ILCS 305/21
Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	

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No

Yes

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Elizabeth Vincze						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)				☐ Check if this is a			
				amended filing			

#### Official Form 106D

#### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

,	Case 17-03000 L	Document	Page 18 of 53	12.25.51 Des	oc mani
Fill in this in	formation to identify your				
Debtor 1	Elizabeth Vincze				
DODIO! !	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case number					
(if known)					heck if this is an
				a	mended filing
Official Fo	orm 106E/F				
Schedule	E/F: Creditors W	ho Have Unsecured	Claims		12/15
any executory o Schedule G: Ex Schedule D: Cr left. Attach the	contracts or unexpired leases recutory Contracts and Unexp editors Who Have Claims Sec	ee Part 1 for creditors with PRIORIT that could result in a claim. Also li ired Leases (Official Form 106G). Dured by Property. If more space is re. If you have no information to repose.	ist executory contracts on Scheo to not include any creditors with needed, copy the Part you need,	lule A/B: Property (Offici partially secured claims fill it out, number the en	al Form 106A/B) and on that are listed in tries in the boxes on the
Part 1: Lis	st All of Your PRIORITY Un	secured Claims			
1. Do any cre	editors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Claims			
	editors have nonpriority unsec	cured claims against you?  art. Submit this form to the court with	your other schedules.		
unsecured	claim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed ist the other creditors in Part 3.If you h	I, identify what type of claim it is. Do	not list claims already inc	luded in Part 1. If more
					Total claim
4.1 <b>A/R</b>	Concepts Inc	Last 4 digits of acc	ount number 0446		\$100.00
Nonpr 18-3	iority Creditor's Name  E. Dundee Rd # 330	When was the debt	incurred?	-	
	ington, IL 60010 er Street City State Zlp Code	As of the date you f	file, the claim is: Check all that ap	nly	
	ncurred the debt? Check one.	ne er me date yeu .	no, the oldin let officer all that ap	Piy	
_	ebtor 1 only	☐ Contingent			
□ De	ebtor 2 only	☐ Unliquidated			
	ebtor 1 and Debtor 2 only	☐ Disputed			
	least one of the debtors and and		RITY unsecured claim:		
_	neck if this claim is for a com	По			
debt		☐ Obligations arisin	ng out of a separation agreement or	divorce that you did not	
Is the	claim subject to offset?	report as priority clain			
■ No		•	or profit-sharing plans, and other s		
☐ Ye	es	Other. Specify	collections for City of Des	s Plaines	

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Debtor 1 Elizabeth Vincze Case number (if know) 4.2 \$2,070.00 **Advocate Health Care** Last 4 digits of account number 8374 Nonpriority Creditor's Name PO BOX 4249 When was the debt incurred? Carol Stream, IL 60197-4249 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes **Advocate Lutheran General** 7284 \$100.00 4.3 Last 4 digits of account number Hospital Nonpriority Creditor's Name PO Box 34249 When was the debt incurred? Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify medical ☐ Yes **Advocate Lutheran General** \$300.00 4.4 9636 Hospital Last 4 digits of account number Nonpriority Creditor's Name PO Box 34249 When was the debt incurred? Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical ☐ Yes

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Debtor 1 Elizabeth Vincze Case number (if know) 4.5 \$90.00 Alex Lima MD Last 4 digits of account number 6510 Nonpriority Creditor's Name 2834 N. Milwaukee When was the debt incurred? Chicago, IL 60618-7401 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical bill ☐ Yes 4.6 Arlington Ridge Pathology Last 4 digits of account number 4816 \$182.88 Nonpriority Creditor's Name 520 E. 22nd Street When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical Other, Specify 4.7 ARMOR SYSTEMS CORP Last 4 digits of account number \$200.00 XXXX Nonpriority Creditor's Name 1700 Kiefer Dr # 1 When was the debt incurred? Zion, IL 60099 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections - medical (Swedish Cov Hosp) ☐ Yes

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Case number (if know)

DCDI	Elizabetii viiicze	Case number (ii kilow)	
4.8	Bright Light Radiology	Last 4 digits of account number 6299	\$47.00
	Nonpriority Creditor's Name 31 Arlington Heights Rd Elk Grove Village, IL 60007-1405	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify medical bill	
4.9	CAPITAL ONE Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$875.00
	PO Box 30281	When was the debt incurred?	
	Salt Lake City, UT 84130		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify charge account	
4.1	CHOICE RECOVERY LLC	Last 4 digits of account number 1817	\$1,498.00
0	Nonpriority Creditor's Name	Last 4 digits of account number 1817	φ1,430.00
	1550 Old Henderson Rd # 100 Columbus, OH 43220	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify collections - medical	
		— Outer, Specify	

Document Page 22 of 53 Case number (if know) Debtor 1 Elizabeth Vincze 4.1 CITIBANK NA STUDENT LOAN \$5,216.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name 701 E 60th St N When was the debt incurred? Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify student loan ☐ Yes 4.1 CITICARDS CBNA \$3,343.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name 701 E 60th St N When was the debt incurred? **Ibs Cdv Disputes** Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify charge card ☐ Yes 4.1 **COMENITY BANK/CARSON'S** 1467 \$209.00 3 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt

■ No

☐ Yes

■ Other. Specify credit card

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Case number (if know) Debtor 1 Elizabeth Vincze 4.1 **Financial Recovery Services** 8723 \$9,180.64 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 385908 When was the debt incurred? Minneapolis, MN 55438-5908 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections for Washington Mutual ☐ Yes **IICAR-INTEGRATED IMAGING** 4.1 6169 \$120.00 **CONSULTANT** Last 4 digits of account number Nonpriority Creditor's Name 44000 Garfield Rd. When was the debt incurred? Clinton Township, MI 48038 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical bill 4.1 0829 \$65,000.00 Robert F. Harris, Public Guardian Last 4 digits of account number Nonpriority Creditor's Name c/o Truemper, Titiner, & Brouch Itd When was the debt incurred? 2015 1700 N. Farnsworth Ave Aurora, IL 60505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Citation for Judgment ☐ Yes

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Debtor 1 Elizabeth Vincze Case number (if know) 4.1 \$100.00 State Collection Service Inc 1562 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 6250** When was the debt incurred? Madison, WI 53716-0250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections ☐ Yes 4.1 State Collection Svs 1582 \$300.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2509 E. Stoughton Rd. When was the debt incurred? Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collections ☐ Yes 4.1 SYNCB/BANANA REPUBLIC 7566 \$294.00 9 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify charge account ☐ Yes

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Debtor 1 Elizabeth Vincze Case number (if know) 4.2 SYNCB/CARE CREDIT \$531.00 XXXX Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify charge account ☐ Yes 4.2 SYNCB/CARE CREDIT \$803.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965036 When was the debt incurred? Orlando, FL 32896-5036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify charge account ☐ Yes 4.2 THD/CBNA Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify charge account ☐ Yes

Document Page 26 of 53 Debtor 1 Elizabeth Vincze Case number (if know) 4.2 THD/CBNA Unknown Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify charge account ☐ Yes 4.2 **US BANK** \$1,603.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 108** When was the debt incurred? Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 **US BANK** \$1.864.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 108** When was the debt incurred? Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify charge account

Debtor	1 Elizabeth	Vincze	Document	Page 2	7 of 5	3 number (if kn	ow)		
4.2	US BANK		Last 4 digits of acc	ount number					\$76.00
<u> </u>	Nonpriority Cred PO BOX 34 Oshkosh, V	47	_	When was the debt incurred?					• • •
•	Number Street	City State ZIp Code the debt? Check one.	As of the date you	file, the claim i	is: Check	call that appl	у		
	Debtor 1 onl	ly	☐ Contingent						
	Debtor 2 onl	ly	☐ Unliquidated						
	Debtor 1 and	d Debtor 2 only	☐ Disputed						
	☐ At least one	of the debtors and another	Type of NONPRIOR	RITY unsecured	d claim:				
	☐ Check if thi	s claim is for a community	☐ Student loans						
	debt Is the claim su	bject to offset?	Obligations arising report as priority cla		aration ag	reement or o	livorce that you di	d not	
	■ No		Debts to pension	or profit-sharin	ıg plans,	and other sin	nilar debts		
	Yes		Other. Specify	charge acc	ount				
4.2	US BANK		Last 4 digits of acc	count number					\$1,574.00
<u>.</u>	Nonpriority Cred		When was the deb	t incurred?					
	Oshkosh, V		As of the date you file, the claim is: Check all that apply						
		City State Zlp Code the debt? Check one.							
	Debtor 1 onl		По и						
		•	Contingent						
	Debtor 2 only		☐ Unliquidated						
	Debtor 1 and		☐ Disputed  Type of NONPRIORITY unsecured claim:						
		of the debtors and another	☐ Student loans						
	debt	s claim is for a community	_	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim su	bject to offset?	report as priority claims						
	■ No		☐ Debts to pension	or profit-sharin	ıg plans,	and other sin	nilar debts		
	Yes		Other. Specify charge account						
Part 3:	List Others	s to Be Notified About a Deb	t That You Already L	isted					
is tryir have r	ng to collect fro nore than one c ed for any debts	you have others to be notified al on you for a debt you owe to sor creditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Un	neone else, list the orig you listed in Parts 1 or submit this page.	inal creditor in	Parts 1	or 2, then lis	st the collection	agency here.	Similarly, if you
	the amounts of f unsecured cla	certain types of unsecured clain iim.	ns. This information is t	for statistical r	eporting	purposes o	nly. 28 U.S.C. §1	59. Add the a	mounts for each
							Total Claim		
	6a. Fotal	Domestic support obligations			6a.	\$		0.00	
from Pa	aims art 1 6b.	Taxes and certain other debts	you owe the governme	nt	6b.	\$		0.00	
	6c.	Claims for death or personal in	njury while you were int	toxicated	6c.	\$		0.00	
	6d.	Other. Add all other priority unse	d all other priority unsecured claims. Write that amount		6d.	\$		0.00	
	6e.	Total Priority. Add lines 6a thro	ugh 6d.		6e.	\$		0.00	
							Total Claim		
	6f.	Student loans			6f.	\$		0.00	

Official Form 106 E/F

from Part 2

Total claims

6g.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

6h.

0.00

0.00

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Debtor 1 Elizabeth Vincze

Other. Add all other nonpriority unsecured claims. Write that amount 6i. \$ here.

Total Nonpriority. Add lines 6f through 6i. 6j.

95,676.52

95,676.52

		170771110	3.0 1 IAA. 7 .7 (H . 16.7			
Fill in this information to identify your case:						
Debtor 1	Elizabeth Vincze					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				<del>-</del>
	Number	Street			_
	City		State	ZIP Code	<del></del>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,		<b>3.</b>		

		Docume	ent Page 30 o	of 53	
Fill in this	information to identify your	case:			
Debtor 1	Elizabeth Vincze				
DCDIOI I	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				_	
Case num (if known)	ber				Charle if this is an
(II KIIOWII)					Check if this is an amended filing
					amended ming
Officia	l Form 106H				
		la <b>h</b> tara			
<u>Scnea</u>	lule H: Your Cod	eptors			12/15
■ No □ Yes  2. With Arizon ■ No. □ Yes	hin the last 8 years, have you na, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	u lived in a community pr , Nevada, New Mexico, Pu use, or legal equivalent live	roperty state or territo lerto Rico, Texas, Wash e with you at the time?	<b>ry?</b> ( <i>Community propert</i> iington, and Wisconsin.)	
in line Form out Co	e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the DGG). Use Schedule D, Column 2: The cre	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
	Name, Number, Street, City, State and Z	ir Code		Check all schedule	es tnat apply:
3.1				☐ Schedule D, line	e
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	
_	N. J. Ott. 1				
	Number Street City	State	ZIP Code		
	Oily	Oldic	211 0000		
				<b>—</b>	
3.2	Name			Schedule D, line	
	Ivaille			☐ Schedule E/F, li	
				☐ Schedule G, line	e
	Number Street	_			
	City	State	ZIP Code		

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<b>-</b> ::::	in this information to information.									
	in this information to identify your obtor 1 Elizabeth V									
	btor 2	111020								
(Spo	buse, if filing)				_					
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number		-				k if this is			
(IT KI	nown)						n amende	J		
_									g postpetition ollowing date:	
<u>O</u>	fficial Form 106l					M	IM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/1
atta	use. If you are separated and yo ch a separate sheet to this form  The separate sheet to this form  Describe Employment  Fill in your employment	On the top of any additi	onal pages, write yo				imber (if	known). A	nswer every	
••	information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>☐ Employed</li><li>■ Not employed</li></ul>				☐ Empl	oyed mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
spoi	mate monthly income as of the cuse unless you are separated.	-	-						-	
•	ou or your non-filing spouse have n e space, attach a separate sheet to		ombine the informatio	n ior air e	mpi	oyers for	triat perso	on on the iii	nes below. II	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

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Deb	tor 1	Elizabeth Vincze	-	Cas	e number ( <i>if known</i> )				
				Fo	or Debtor 1		ebtor : iling s	2 or pouse	
	Cop	by line 4 here	4.	\$	0.00	\$		N/A	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	
	5e.	Insurance	5e.	\$	0.00	\$		N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	
	5g.	Union dues	5g.	\$_	0.00	\$		N/A	
	5h.	Other deductions. Specify:	5h.+	+ \$_	0.00	+ \$		N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A	
	8e.	Social Security	8e.	\$	0.00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8f. 8g.	\$ \$	0.00	\$ 		N/A N/A	
	8h.	Other monthly income. Specify: Contribution from former spouse	8h.⊣	· ·	800.00			N/A	
		<u> </u>	_			<u> </u>			1
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	800.00	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		800.00 + \$		N/A	= \$	800.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'0.  Ψ		Ψ		IN/A	-  <sup>\Pi</sup>	800.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not excity:	depen				hedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certaillies					12.	\$	800.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?					Combin monthly	ed income
	_	Vac Evolain:							

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Fill	in this information to identify your case:				
Deb	otor 1 Elizabeth Vincze		Che	ck if this is:	
	otor 2 ouse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOI	IS		MM / DD / YYYY	
				, 22 , 1111	
	e number nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?				
	<ul><li>☐ No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for</li></ul>	or Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Pes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes ☐ No
					Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supple blicable date.				
the	lude expenses paid for with non-cash government assistance if y value of such assistance and have included it on Schedule I: Yo ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Including payments and any rent for the ground or lot.	clude first mortgage	e 4. S	ß	600.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	5	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. 3 4d. 3		0.00
5.	Additional mortgage payments for your residence, such as home	e equity loans	4a. 3	·	0.00

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Debto	r 1 Elizabetl	h Vincze	Case num	ber (if known)	
6. <b>L</b>	Itilities:				
-		, heat, natural gas	6a.	\$	0.00
	•	wer, garbage collection	6b.		0.00
		e, cell phone, Internet, satellite, and cable services	6c.	·	0.00
	•		6d.	·	
	I			· ·	0.00
		ekeeping supplies	7.	·	300.00
		children's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	\$	0.00
		products and services	10.	\$	0.00
	ledical and de	•	11.	\$	0.00
	ransportation. On not include ca	Include gas, maintenance, bus or train fare.	12.	\$	150.00
		clubs, recreation, newspapers, magazines, and books	13.	·	0.00
				·	0.00
		ributions and religious donations	14.	\$	0.00
	<b>nsurance.</b> No not include in	surance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
	5b. Health ins		15a. 15b.	·	
				·	0.00
	5c. Vehicle in		15c.	·	55.00
	5d. Other insu		15d.	<b>&gt;</b>	0.00
	axes. Do not in specify:	clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
		ease payments:		· —	
		ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	\$	0.00
	7c. Other. Spe		17c.	·	0.00
	7d. Other. Spe		17d.	·	0.00
		of alimony, maintenance, and support that you did not report as		Ψ	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
		s you make to support others who do not live with you.		\$	0.00
S	Specify:		19.		
). <b>C</b>	ther real prop	erty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
		s on other property	20a.		0.00
	0b. Real estat		20b.	\$	0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		er's association or condominium dues	20a. 20e.		
		er's association or condominium dues		·	0.00
. <b>C</b>	Other: Specify:	-	21.	+\$	0.00
2. <b>C</b>	alculate your	monthly expenses			
	2a. Add lines 4	•		\$	1,105.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	-,
				·	4 405 00
2	.zc. Auu IIIIe ZZ	a and 22b. The result is your monthly expenses.		\$	1,105.00
3. <b>C</b>	alculate your	monthly net income.			
2	3a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	800.00
		monthly expenses from line 22c above.	23b.		1,105.00
_	1,7,2	, ,			.,
2		our monthly expenses from your monthly income.		Φ.	205.00
	The result	is your monthly net income.	23c.	\$	-305.00
) / F	lo vou eveest	on increase or degrees in your expenses within the verse often	ou file 4h!-	form?	
		an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you			or decrease because o
		terms of your mortgage?	a mongage	paymont to morease	on accidade because o
	No.	· · · · · · · · · · · · · · · · · · ·			
		Frank's home			
L	☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:						
Debtor 1	Elizabeth Vincze							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number (if known)					☐ Check if this is an amended filing			
Official For		ın Individual	Debtor's Sch	edules	12/15			
If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below								
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out ban	kruptcy forms?				
■ No								
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)			
•	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules filed w	vith this declaration	on and			

Signature of Debtor 2

Date

X /s/ Elizabeth Vincze Elizabeth Vincze

Signature of Debtor 1

Date March 28, 2017

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Fill	l in this inform	nation to identify you	r case:							
De	btor 1	Elizabeth Vincze								
De	ebtor 2	First Name	Middle Name	Last Name						
1 -	ouse if, filing)	First Name	Middle Name	Last Name						
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS						
00										
	nse number					Check if this is an				
					a	mended filing				
Of	fficial For	m 107								
			Affairs for Individ	duals Filing for E	Bankruptcy	4/1				
info nun	ormation. If member (if known	ore space is needed, i). Answer every que	attach a separate sheet to	this form. On the top of an	e equally responsible for sup ly additional pages, write you					
				2.704 2010.0						
1.	What is your	current marital statu	IS?							
	☐ Married									
	Not mare	ried								
2.	During the la	ring the last 3 years, have you lived anywhere other than where you live now?								
	■ No									
	☐ Yes. List	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there				
3.					nity property state or territory Rico, Texas, Washington and W					
siai	les and territori	es include Anzona, Ca	illioitila, idalio, Lodisialia, ive	vada, New Mexico, i dello N	ilico, rexas, washington and w	riscorisiri.)				
	■ No									
	☐ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).						
Pa	rt 2 Explain	n the Sources of You	r Income							
4.	Fill in the tota If you are filin	I amount of income yo	u received from all jobs and a have income that you receive	all businesses, including part	nder Debtor 1.	ndar years?				
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					
	r last calendar anuary 1 to De	r year: cember 31, 2016 )	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					
Offic	cial Form 107			airs for Individuals Filing for E		page				

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Page 37 of 53 Document ase number (if known) Debtor 1 Elizabeth Vincze Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$0.00 ☐ Wages, commissions, □ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Contribution \$1,600.00 the date you filed for bankruptcy: \$0.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe

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7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  ■ No □ Yes. List all payments to an insider.	rtners; relatives of any gen- control, or owner of 20% o	eral partners; partner more of their voting	erships of which yo g securities; and ar	u are a general p ny managing age	artner; corporation nt, including one fo
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost  No	., , , , , , , , , , , , , , , , , , ,	ments or transfer a	nny property on a	ccount of a debt	that benefited an
	Yes. List all payments to an insider	D-1	T-1-1	<b>A</b>	D (a (b.)	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	
Pal	rt 4: Identify Legal Actions, Repossession	s. and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the o	ase
	Robert F. harris, Cook County Public Guardian v. Elizabeth Vincze 2016 L 050829	Citation To Discover Assets	Circuit Court o County, IL	f Cook	■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		rty repossessed, f	oreclosed, garnis	hed, attached, s	eized, or levied?  Value of the property
		Explain what happened				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any amo	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an  ■ No □ Yes		rty in the possessi			of creditors, a

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Case number (if known) Document Debtor 1 Elizabeth Vincze

Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptc  ■ No □ Yes. Fill in the details for each gift.	y, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	y, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contril  Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,
	how the loss occurred Incl	scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending trance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prep Include any attorneys, bankruptcy petition prepa	, did you or anyone else acting on your behalf pay or aring a bankruptcy petition?  Irers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	The Burns Law Firm P.C. 53 W. Jackson Blvd. Suite 724 Chicago, IL 60604	\$ 335.00 for filing fee and \$ 165.00 towards attorney fees	March 8, 2017	\$500.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 **Elizabeth Vincze** 

<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your proper include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>							
	Yes. Fill in the details.  Person Who Received Transfer Address	Description and v		payme	ibe any property or ents received or debts n exchange	Date transfer was	3
	Person's relationship to you			para ii	n oxonango		
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No		ny property to a	self-settle	d trust or similar device	of which you are a	
	☐ Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer wa made	S
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Unit	s		
	<u> </u>		•	•			
20.	sold, moved, or transferred?	•				,	
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last baland before closing of transf	or
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depos cash, or other valuables?				sitory for securities,			
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrupt	cy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
Par	t 9: Identify Property You Hold or Control	for Someone Fise					
23.			ude any proper	ty you borr	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Valu	ıe
	t 10: Give Details About Environmental Info						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Elizabeth Vincze** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.					
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.					
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	ler or in violation of an environme	ental law?
		No				
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice
25.	Hav	re you notified any governmental unit of	any release of hazardous material?			
	■ No □ Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					nd orders.	
	■ No □ Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or (	Connections to Any Business			
27.		<del></del>	-	v of	the following connections to any	husiness?
		☐ A sole proprietor or self-employed in		•	•	Duoinioco I
		☐ A member of a limited liability comp			-	
		☐ A partner in a partnership				
		☐ An officer, director, or managing exe	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to P	art 12.			
		Yes. Check all that apply above and fill	in the details below for each business	i.		
		siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security r	
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	iumber of friit.
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement t	o an	nyone about your business? Inclu	de all financial
		No				
		Yes. Fill in the details below.				
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued			
_	_					

Part 12: Sign Below

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Debtor 1 Elizabeth Vincze

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Elizabeth Vincze		
	beth Vincze ture of Debtor 1	Signature of Debtor 2
Date	March 28, 2017	Date
Did yo	u attach additional p	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
□ Yes	<b>i</b>	
Did yo	u pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
No		
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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			9	
Fill in this infor	mation to identify your	case:		
Debtor 1	Elizabeth Vincze			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
■ creditors hav ■ you have leas You must file th whiche on the  If two married posign as Be as complete	ever is earlier, unless the form eople are filing togethe nd date the form.	our property, or and the lease has n vithin 30 days after ne court extends th r in a joint case, bo		the creditors and lessors you list information. Both debtors must
	our Creditors Who Hav			
1. For any credit information b		art 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
Identify the cr	reditor and the property t	that is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's			По ни	
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	,		☐ Retain the property and enter into a	☐ Yes
Description of property	İ		Reaffirmation Agreement.	
securing debt	:		☐ Retain the property and [explain]:	
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
	_		☐ Retain the property and enter into a	☐ Yes

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

Reaffirmation Agreement.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 $\hfill\square$  Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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Debtor 1	Elizabeth Vincze	Case number (if known)	
name: Descrip		☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
securin	•	☐ Retain the property and [explain]:	-
For any ui	rmation below. Do not list real estate leas	eases listed in Schedule G: Executory Contracts and Unexpired es. Unexpired leases are leases that are still in effect; the ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No
	Sign Below		☐ Yes
	nalty of perjury, I declare that I have indica hat is subject to an unexpired lease.	ted my intention about any property of my estate that sec	cures a debt and any personal
Eliz	Elizabeth Vincze abeth Vincze ature of Debtor 1	Signature of Debtor 2	
Date		Date	

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-09688 Doc 1 Filed 03/28/17 Entered 03/28/17 12:23:51 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Elizabeth Vincze		Case N	lo	
		Debtor(s)	Chapte	er <b>7</b>	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR	DEBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy	, or agreed to be p	aid to me, for services reno	dered or to
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have received			165.00	
	Balance Due		\$	1,535.00	
2. 5	335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	Γhe source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	I have not agreed to share the above-disclosed compensation.	ntion with any other person	n unless they are n	nembers and associates of n	ny law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				v firm. A
6.	In return for the above-disclosed fee, I have agreed to render	r legal service for all aspec	cts of the bankrupt	cy case, including:	
ŀ	a. Analysis of the debtor's financial situation, and rendering of the debtor and filing of any petition, schedules, stateme of the Representation of the debtor at the meeting of creditors and analysis as needed.  Negotiations with secured creditors to reduce the reaffirmation agreements and applications of the preparation and filing of motions pursuant advising client with regard to defenses available.	nt of affairs and plan whic nd confirmation hearing, a nce to market value; ex as needed with regard to 11 USC 522(f)(2)(A) ilable for motions to m	th may be required and any adjourned semption planni to reaffirmation for avoidance of	; hearings thereof; ng; preparation and fili ns of consumer obligat f liens on household g	ing of ions; oods;
7. 1	By agreement with the debtor(s), the above-disclosed fee doo Representation of the debtors in any advers dischargeability actions, or judicial lien avo reopen a case closed without a discharge	sary proceeding, inclu	ding but not lim		
	C	ERTIFICATION			
	certify that the foregoing is a complete statement of any agankruptcy proceeding.	reement or arrangement fo	or payment to me f	or representation of the deb	otor(s) in
M	arch 28, 2017	/s/ James J. Bur	ns Jr. #		
	ate	James J. Burns			<del></del>
		Signature of Attorn The Burns Law I			
		53 West Jackson			
		Suite 724			
		Chicago, IL 6060		•	
		312-880-0195 Fi info@burnsbank		Ď.	
		Name of law firm	apicy.com		<u> </u>
		1. come of very juint			

### **United States Bankruptcy Court** Northern District of Illinois

In re	Elizabeth Vincze		Case No.	
		Debtor(s)	Chapter 7	
	VE	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	27
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of credi	tors is true and correct to the	he best of my
Date:	March 28, 2017	/s/ Elizabeth Vincze Elizabeth Vincze Signature of Debtor		

A/R Concepts Inc 18-3 E. Dundee Rd # 330 Barrington, IL 60010

Advocate Health Care PO BOX 4249 Carol Stream, IL 60197-4249

Advocate Lutheran General Hospital PO Box 34249 Hinsdale, IL 60522

Advocate Lutheran General Hospital PO Box 34249 Hinsdale, IL 60522

Alex Lima MD 2834 N. Milwaukee Chicago, IL 60618-7401

Arlington Ridge Pathology 520 E. 22nd Street Lombard, IL 60148

ARMOR SYSTEMS CORP 1700 Kiefer Dr # 1 Zion, IL 60099

Bright Light Radiology 31 Arlington Heights Rd Elk Grove Village, IL 60007-1405

CAPITAL ONE PO Box 30281 Salt Lake City, UT 84130

CHOICE RECOVERY LLC 1550 Old Henderson Rd # 100 Columbus, OH 43220

CITIBANK NA STUDENT LOAN 701 E 60th St N Sioux Falls, SD 57104

CITICARDS CBNA
701 E 60th St N
Ibs Cdv Disputes
Sioux Falls, SD 57104

COMENITY BANK/CARSON'S PO Box 182789 Columbus, OH 43218

Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438-5908

IICAR-INTEGRATED IMAGING CONSULTANT 44000 Garfield Rd. Clinton Township, MI 48038

Robert F. Harris, Public Guardian c/o Truemper, Titiner, & Brouch ltd 1700 N. Farnsworth Ave Aurora, IL 60505

State Collection Service Inc PO BOX 6250 Madison, WI 53716-0250

State Collection Svs 2509 E. Stoughton Rd. Madison, WI 53716

SYNCB/BANANA REPUBLIC PO Box 965036 Orlando, FL 32896

SYNCB/CARE CREDIT PO Box 965036 Orlando, FL 32896

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